

Intensive Treatment Foster Care Program

Quarterly Statistical Report

STATEWIDE	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	1	10	49	58	70	44
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	2	3	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	1	0
c. Total Children Discharged to Own Home	1c.	0	1	1	0	1	0
d. Total Children Continuing in Placement	1d.	1	8	45	54	62	36
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	1	0	1	1	4
f. Total Children with Other Outcomes	1f.	0	0	1	0	5	4
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	965.20	5,695.20	6,823.25	6,690.00	4,170.35
3. Total Psychiatrist Hours	3.	0.00	15.84	84.70	72.30	53.04	34.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	153.25	90.00	80.75	33.75
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	7.00	32.50	42.00	54.00	32.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	3.00	19.00	15.00	26.00	14.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY ALAMEDA	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	1	3	10	8	7
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	1	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	1	3	9	7	4
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	1	3
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	145.30	333.20	695.40	522.10	97.10
3. Total Psychiatrist Hours	3.	0.00	0.00	1.00	4.00	9.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	9.00	6.00	6.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	1.00	3.00	10.00	8.00	6.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	2.00	2.00	3.00	2.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY BUTTE	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	0	1	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	0	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	1	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	4.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	0.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY CONTRA COSTA	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	3	1	5	2
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	1	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	2	1	5	1
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	1
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	318.50	161.00	477.30	83.60
3. Total Psychiatrist Hours	3.	0.00	0.00	17.00	7.00	3.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	60.00	11.00	17.50	3.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	1.00	0.00	5.00	2.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	1.00	1.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY FRESNO	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	4	1	1
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	1	0
d. Total Children Continuing in Placement	1d.	0	0	0	4	0	1
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	898.00	9.50	289.75
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	9.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	2.00	0.00	6.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	5.00	1.00	2.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	1.00	1.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY KINGS	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	0	0	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	0	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	0.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	0.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY LOS ANGELES	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	1	0	1	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	1	0	1	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	294.50	0.00	163.50	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	3.00	0.00	3.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	1.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	0.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY MADERA	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	0	1	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	1	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	116.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	1.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	1.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY MARIN	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	0	0	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	0	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	0.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	0.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY MENDOCINO	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	0	0	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	0	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	0.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	0.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY MERCED	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	0	0	2
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	0	2
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	0.00	124.25
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	2.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	2.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	0.00	2.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	1.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY ORANGE	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	2	0	5	1
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	2	0	5	1
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	502.00	0.00	1,219.00	228.00
3. Total Psychiatrist Hours	3.	0.00	0.00	1.00	0.00	6.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	3.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	2.00	0.00	3.00	1.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	2.00	0.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY PLACER	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	0	0	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	0	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	0.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	0.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY SACRAMENTO	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	5	5	7	9	4
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	4	5	7	8	3
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	1	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	1	1
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	328.00	565.75	447.75	359.00	104.75
3. Total Psychiatrist Hours	3.	0.00	3.84	8.20	5.55	10.79	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	13.00	12.00	9.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	3.00	6.00	4.00	6.00	3.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	2.00	4.00	3.00	3.00	1.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY SAN DIEGO	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	1	0	1
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	1	0	1
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	216.25	0.00	149.50
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	1.50	0.00	0.50
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	1.00	0.00	1.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY SAN FRANCISCO	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	2	7	1
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	1	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	7	1
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	1	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	187.30	334.10	2.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	5.00	2.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	25.75	11.75	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	2.00	7.00	1.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	1.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY SAN JOAQUIN	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	1	4	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	1	4	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	296.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	5.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	5.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	1.00	4.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	1.00	4.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY SAN LUIS OBISPO	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	2	1	2	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	2	1	2	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	540.00	94.00	510.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	3.00	3.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	0.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY SAN MATEO	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	2	2	1	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	1	2	1	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	1	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	65.50	392.25	117.50	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	24.00	6.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	63.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	2.00	1.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	1.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY SANTA BARBARA	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	0	1	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	1	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	0.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	1.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY SANTA CLARA	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	1	3	18	8	8	12
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	1	1	0	0	0
d. Total Children Continuing in Placement	1d.	1	2	17	8	7	9
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	3
f. Total Children with Other Outcomes	1f.	0	0	0	0	1	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	405.00	2,048.00	1,271.80	975.50	1,445.40
3. Total Psychiatrist Hours	3.	0.00	12.00	15.00	14.00	6.00	20.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	12.25	0.00	15.00	12.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	2.00	10.00	5.00	8.00	9.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	1.00	7.00	2.00	5.00	5.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY SANTA CRUZ	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	0	0	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	0	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	0.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	0.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY SOLANO	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	1	0	1	0	1
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	1	0	1	0	1
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	86.90	0.00	124.00	0.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	2.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	1.00	0.00	1.00	0.00	1.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	1.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY SONOMA	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	0	0	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	0	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	0.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	0.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY STANISLAUS	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	13	18	15	12
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	1	1	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	1	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	12	17	12	12
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	1	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	1	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	1,027.75	2,202.00	1,531.50	1,646.00
3. Total Psychiatrist Hours	3.	0.00	0.00	12.50	15.75	8.25	9.50
4. Total Emergency Social Work Hours	4.	0.00	0.00	4.00	28.75	13.50	4.75
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	10.50	11.00	8.00	4.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	4.00	6.00	6.00	2.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY TULARE	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	0	1	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	1	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	55.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	1.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	1.00	0.00

Intensive Treatment Foster Care Program

Quarterly Statistical Report - By County

COUNTY YOLO	Quarter Ending				
	Month		Version 1		Year
	1 <input type="checkbox"/> Mar	2 <input type="checkbox"/> Jun	3 <input type="checkbox"/> Sep	4 <input checked="" type="checkbox"/> Dec	2000

		TOTAL BY AGE GROUP					
		0-3	4-6	7-9	10-12	13-15	16-19
Children:							
1. Placed in Program During Quarter (sum of items 1a thru 1f below)	1.	0	0	0	0	0	0
Outcomes of Children Referred to Program:							
a. Total Children Returned to a More Intensive Program	1a.	0	0	0	0	0	0
b. Total Children Hospitalized	1b.	0	0	0	0	0	0
c. Total Children Discharged to Own Home	1c.	0	0	0	0	0	0
d. Total Children Continuing in Placement	1d.	0	0	0	0	0	0
e. Total Children Moved to Less Intensive Foster Care Placement	1e.	0	0	0	0	0	0
f. Total Children with Other Outcomes	1f.	0	0	0	0	0	0
Services Provided to Children and Families:							
2. Total In-Home Support Counselor Hours	2.	0.00	0.00	0.00	0.00	0.00	0.00
3. Total Psychiatrist Hours	3.	0.00	0.00	0.00	0.00	0.00	0.00
4. Total Emergency Social Work Hours	4.	0.00	0.00	0.00	0.00	0.00	0.00
5. Total Families Receiving Family Therapy Services:							
a. During the Quarter	5a.	0.00	0.00	0.00	0.00	0.00	0.00
b. On a Weekly Basis (must be less than or equal to item 5a.)	5b.	0.00	0.00	0.00	0.00	0.00	0.00